Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 1 of 47

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Writ	e the name that is on	Millicent	
	your government-issued picture identification (for example, your driver's license or passport).		First name	First name
		Middle name	Middle name	
	Bring your picture		Dayes-Gaines	
		identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-0527	

Entered 09/02/16 11:41:32 Page 2 of 47 Case 16-28323 Doc 1 Filed 09/02/16 Desc Main Document

Case number (if known)

Debtor 1 Millicent Dayes-Gaines

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s)		
5.	Where you live	2055 West Chase	If Debtor 2 lives at a different address:		
		Chicago, IL 60645 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Cook County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Entered 09/02/16 11:41:32 Desc Main Page 3 of 47 Doc 1 Filed 09/02/16 Case 16-28323

Document Case number (if known) Debtor 1 Millicent Dayes-Gaines

Par	Tell the Court About	Your Ba	ankruptcy Ca	se			
7.	The chapter of the Bankruptcy Code you are				of each, see Notice Required by fpage 1 and check the appropria	11 U.S.C. § 342(b) for Individuals Filing for Bankrup te box.	tcy
	choosing to file under	Chapter 7					
		☐ Ch	apter 11				
		☐ Ch	apter 12				
		☐ Ch	apter 13				
8.	How you will pay the fee		about how yo	u may pay. Typ attorney is subr	pically, if you are paying the fee y	ck with the clerk's office in your local court for more dourself, you may pay with cash, cashier's check, or nualf, your attorney may pay with a credit card or check	noney
					tallments. If you choose this option (Official Form 103A).	on, sign and attach the Application for Individuals to	Pay
						n only if you are filing for Chapter 7. By law, a judge	
						our income is less than 150% of the official poverty linn installments). If you choose this option, you must fi	
			the Application	on to Have the C	Chapter 7 Filing Fee Waived (Offi	cial Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the	■ No.	•				
	last 8 years?	☐ Yes	S.				
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is	☐ Yes					
	not filing this case with you, or by a business partner, or by an affiliate?	L res	S.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to I	ne 12.			
	residence:	☐ Yes	s. Has yo	ur landlord obta	ained an eviction judgment again	st you and do you want to stay in your residence?	
				No. Go to line	12.		
				Yes. Fill out In		Judgment Against You (Form 101A) and file it with the	nis

Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Case 16-28323 Document Page 4 of 47

Debtor 1 Millicent Dayes-Gaines

Case number (if known)

Part	Report About Any Bu	sinesses	You Own	as a Sole Propriet	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of bus	iness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any		
	If you have more than one sole proprietorship, use a		Numb	er, Street, City, Stat	e & ZIP Code	
	separate sheet and attach it to this petition.		Check	k the appropriate bo	x to describe your business:	
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))	
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set ap, nes. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, stat tions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the pJ.S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am r	ot filing under Chap	tter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	lebtor, see 11		iling under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankrup	otcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy C	Code.
Part	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to	□ Yes.	What is	the hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code	

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 5 of 47

Debtor 1 Millicent Dayes-Gaines

Dayes-Gaines Case number (if known)

A 15. Tell the court whether

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Filed 09/02/16 Case 16-28323 Doc 1 Entered 09/02/16 11:41:32 Desc Main

Document Page 6 of 47 Case number (if known) Debtor 1 **Millicent Dayes-Gaines** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion ■ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Millicent Dayes-Gaines

Millicent Dayes-Gaines Signature of Debtor 1

Executed on September 2, 2016

MM / DD / YYYY

Signature of Debtor 2

MM / DD / YYYY

Executed on

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Page 7 of 47 Document

Debtor 1 Millicent Dayes-Gaines

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Richard	d Fonfrias	Date	September 2, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Richard Fo	onfrias		
Printed name			
Fonfrias L	aw Group, LLC		
70 West M	adison		
Suite 1400			
Chicago, I	L 60602		
Number, Street,	City, State & ZIP Code		
Contact phone	3129690730	Email address	rfonfrias2025@gmail.com
Bar number & St	tate		

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main

	Docume	ent Page 8 of 4	+ /	
ation to identify your	case:			
Millicent Dayes-G	aines			
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
				☐ Check if this is an amended filing
	Millicent Dayes-G First Name	First Name Middle Name	Millicent Dayes-Gaines First Name Middle Name Last Name First Name Middle Name Last Name	Millicent Dayes-Gaines First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	255,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	98,771.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	353,771.00
Par	2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	551,271.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	63,367.00
	Your total liabilities	\$	614,638.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,373.77
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,346.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal	. family, or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Entered 09/02/16 11:41:32 Case 16-28323 Doc 1 Filed 09/02/16 Desc Main Document

Page 9 of 47
Case number (if known) Debtor 1 Millicent Dayes-Gaines

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 Line 14.

504.77

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	(Case 16-28323	Doc 1	Filed 09/02/16 Document	Entered 09/02/16	11:41:32	Desc	: Main
Fill	in this in	ormation to identify yo	ur case and th					
Deb	otor 1	Millicent Dayes	-Gaines					
		First Name	Middle	Name	Last Name			
	otor 2 use, if filing)	First Name	Middle	Name	Last Name			
		Bankruptcy Court for the	. NODTHEDI		NOIS			
Offic	ieu Siales	Bankruptcy Court for the	. NORTHER	N DISTRICT OF ILLIE	1013			
Cas	se number				-			Check if this is an amended filing
SC 1 ea	ched		ribe items. List a		in asset fits in more than one c			
nfor	mation. If r	nore space is needed, atta	ch a separate sh	eet to this form. On the	e are filing together, both are e e top of any additional pages, v			
					land, or similar property?			
_	_		ible iliterest ili ai	ny residerice, building,	iand, or similar property:			
	No. Go to							
	Yes. Whe	re is the property?						
1.1				What is the property	2 Cheek all that apply			
1.1	2055 W	est Chase		Single-family h		Do not deduct se	cured claim	s or exemptions. Put
	Street addr	ess, if available, or other descript	ion	Duplex or mult		the amount of any	y secured c	laims on Schedule D: Secured by Property.
	Chicag	o IL 6	0645-0000	Land	or mobile home	Current value of entire property?		Current value of the portion you own?
	City	State	ZIP Code	☐ Investment pro☐ Timeshare	operty	\$255,00	0.00	\$255,000.00
				☐ Other	in the property? Check one	(such as fee sim a life estate), if k	ple, tenan	r ownership interest cy by the entireties, or
	01-			Debtor 1 only		Fee simple		
	Cook			☐ Debtor 2 only	2.1. 2. 1			
	County			☐ Debtor 1 and [☐ At least one of	Debtor 2 only f the debtors and another	Check if this (see instruction		unity property
					ou wish to add about this item,	•	10)	
				3 Bed, 2 Bath, 1	500 sf			

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$255,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 11 of 47 Case number (if known)

Debt	or 1 N	illicent Dayes-Gaines	Ca:	se number (if known)	
3. Ca	rs, vans,	trucks, tractors, sport utility ve	hicles, motorcycles		
	No				
	Yes				
_	res				
3.1	Make:	Infiniti	Who has an interest in the property? Check one	Do not deduct secured of	claims or exemptions. Put
5.1	Model:	J30	Debtor 1 only		ed claims on Schedule D: nims Secured by Property.
	Year:	1994	Debtor 1 only Debtor 2 only		
		nate mileage: 140000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other inf	ormation:	☐ At least one of the debtors and another		
	Fair Co	ondition		\$400.00	\$400.00
			☐ Check if this is community property (see instructions)		
			(000)		
3.2	Make:	Dodge	Who has an interest in the property? Cheek are	Do not deduct secured of	claims or exemptions. Put
3.2		Durango	Who has an interest in the property? Check one		ed claims on Schedule D: nims Secured by Property.
	Model: Year:	2002	■ Debtor 1 only □ Debtor 2 only		
		nate mileage: 160000	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		ormation:	☐ At least one of the debtors and another		, ,
	Fair Co	ondition		.	
			Check if this is community property	\$1,850.00	\$1,850.00
			(see instructions)		
			n for all of your entries from Part 2, including an		\$2,250.00
		pe Your Personal and Household Ite			
Do y	ou own c	r have any legal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E</i> :	kamples: No	goods and furnishings Major appliances, furniture, linens	, china, kitchenware		or exemptions.
-	Yes. De	scride			
		Refrigerator, Wa	asher/Dryer, Stove, Dishwasher, Microwave	•	\$600.00
		Couch, Lovesea	at, Lamps, Rugs, Tables		\$200.00
		<u>. </u>		<u> </u>	<u> </u>
		Bed, Bedding &	Related Furnishings		\$100.00
		Dining Table &	Chairs		\$80.00
	ectronics kamples:	Televisions and radios: audio vide	eo, stereo, and digital equipment; computers, printer	rs. scanners: music collect	ions: electronic devices
		including cell phones, cameras, m		_, 556510, 1114010 0011001	5.058.6186.4041006
	No				
	Yes. De	scribe			

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main

Page 12 of 47
Case number (if known) Document Debtor 1 **Millicent Dayes-Gaines**

	Television, DVD Player	\$200.00
8.	Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coincoincoincoincoincoincoincoincoincoin	in, or baseball card collections;
9.	Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments ■ No □ Yes. Describe	s and kayaks; carpentry tools;
10	 Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No □ Yes. Describe 	
11	 Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No ■ Yes. Describe 	
	Various Clothing	\$200.00
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, □ No ■ Yes. Describe Various Costume Jewelry	\$80.00
	 Non-farm animals	
1	5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$1,460.00
P	art 4: Describe Your Financial Assets	
	o you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	 Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your pet No Yes 	ition

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Page 13 of 47
Case number (if known) Document Debtor 1 Millicent Dayes-Gaines 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... 17.1. Checking Chase Bank - Acct: 6926 \$550.00 Chase Bank - Acct: 5100 \$511.00 17.2. Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **IRA** \$94,000.00 Chase Bank - IRA 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes.....

☐ Yes. Give specific information about them...

 $\hfill \square$ Yes. Give specific information about them...

D	ebtor 1	Millicent Dayes-Gaines	Document	Page 14 of 47 Case number (if known,)
27.	Exampa ■ No	es, franchises, and other general intar les: Building permits, exclusive licenses, Give specific information about them		n holdings, liquor licenses, professional licen	ses
	□ 1es.	Give specific information about them			
М	oney or p	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refu ■ No	unds owed to you			
	☐ Yes. (Give specific information about them, inc	luding whether you alre	ady filed the returns and the tax years	
29.	■ No		ısal support, child supp	ort, maintenance, divorce settlement, propert	y settlement
30.		mounts someone owes you les: Unpaid wages, disability insurance p benefits; unpaid loans you made to		efits, sick pay, vacation pay, workers' compe	ensation, Social Security
	☐ Yes.	Give specific information			
31.		s in insurance policies les: Health, disability, or life insurance; h	ealth savings account (HSA); credit, homeowner's, or renter's insura	ance
	☐ Yes. N	Name the insurance company of each po Company name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
32.	If you a	erest in property that is due you from re the beneficiary of a living trust, expec ne has died.		ed surance policy, or are currently entitled to red	ceive property because
	■ No				
	⊔ Yes.	Give specific information			
33.		against third parties, whether or not y les: Accidents, employment disputes, ins			
		Describe each claim			
34.	Other c	ontingent and unliquidated claims of	every nature, includin	g counterclaims of the debtor and rights t	o set off claims
		Describe each claim			
35.	Any fina	ancial assets you did not already list			
		Give specific information			
36		ne dollar value of all of your entries front rt 4. Write that number here		ny entries for pages you have attached	\$95,061.00
Pa	rt 5: Des	cribe Any Business-Related Property You	Own or Have an Interest	In. List any real estate in Part 1.	
37	Do vou o	wn or have any legal or equitable interest i	n any business-related n	roperty?	
	No. Go	•	,seee rolated p	-e- 9-	
	Yes. G	o to line 38.			

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Page 15 of 47

Case number (if known) Document Debtor 1 Millicent Dayes-Gaines Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$255,000.00 Part 2: Total vehicles, line 5 \$2,250,00 57. Part 3: Total personal and household items, line 15 \$1,460.00 Part 4: Total financial assets, line 36 \$95,061.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61.

\$98,771.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 6

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$98,771.00

\$353,771.00

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main

Fill in this infor	rmation to identify your	case:		
Debtor 1	Millicent Dayes-G	Saines		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check i

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the I	Property	You	Claim a	s Exemp	ıt
---------	----------	-------	----------	-----	---------	---------	----

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	, ,		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2055 West Chase Chicago, IL 60645 Cook County	\$255,000.00		\$8,663.00	735 ILCS 5/12-901
3 Bed, 2 Bath, 1500 sf Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
1994 Infiniti J30 140000 miles	\$400.00		\$400.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2002 Dodge Durango 160000 miles Fair Condition	\$1,850.00		\$2,100.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
Refrigerator, Washer/Dryer, Stove, Dishwasher, Microwave	\$600.00		\$600.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Couch, Loveseat, Lamps, Rugs,	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit	

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 17 of 47

Depto	Millicent Dayes-Gaines			Case number (if known)	
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	ed, Bedding & Related Furnishings ine from Schedule A/B: 6.3	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
_				100% of fair market value, up to any applicable statutory limit	
	ining Table & Chairs	\$80.00		\$80.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	elevision, DVD Player	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	arious Clothing	\$200.00		\$200.00	735 ILCS 5/12-1001(a)
L	ille IIIIII <i>Schedule AVD</i> . 11.1			100% of fair market value, up to any applicable statutory limit	
	arious Costume Jewelry	\$80.00		\$80.00	735 ILCS 5/12-1001(b)
	Te nom osnodalo /VB. 1211			100% of fair market value, up to any applicable statutory limit	
	thecking: Chase Bank - Acct: 6926	\$550.00		\$550.00	735 ILCS 5/12-1001(b)
	ine nom <i>Schedule AVD</i> . 11.1			100% of fair market value, up to any applicable statutory limit	
	avings: Chase Bank - Acct: 5100	\$511.00		\$511.00	735 ILCS 5/12-1001(b)
_	The Hoth Genedate AVB. 17.2			100% of fair market value, up to any applicable statutory limit	
	RA: Chase Bank - IRA	\$94,000.00		\$94,000.00	735 ILCS 5/12-1006
	110 110 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption subject to adjustment on 4/01/19 and every and the No Yes. Did you acquire the property covered No	3 years after that for ca	ises fi	,	,

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main

		Document P	age 18	3 of 47		
Fill in this information	on to identify you	r case:				
Debtor 1	Milliaant Dayes	Coines				
	Millicent Dayes- irst Name		st Name		-	
Debtor 2						
	irst Name	Middle Name La	st Name		-	
		NODELIEDA DIOTRIOT OF ILLING				
United States Bankru	ptcy Court for the:	NORTHERN DISTRICT OF ILLING	JIS		-	
Case number						
(if known)					☐ Check	if this is an
					_	
						3
Official Form 1	06D					
		Who Have Claims Se	ocuro	d by Droport	+s./	40/4E
Scriedule D.	Creditors	Willo Have Claims Se	ecure	d by Proper	ιy	12/15
Be as complete and acc	urate as possible.	lf two married people are filing together, b	ooth are ed	qually responsible for su	upplying correct informa	tion. If more space
	litional Page, fill it o	out, number the entries, and attach it to th	nis form. O	n the top of any additio	nal pages, write your na	me and case
number (if known).						
1. Do any creditors have	_					
□ No. Check this	box and submit the	nis form to the court with your other sch	edules. Y	ou have nothing else t	to report on this form.	
Yes. Fill in all of	of the information	below.				
Part 1: List All Se	cured Claims					
•				Column A	Column B	Column C
		nore than one secured claim, list the creditor a particular claim, list the other creditors in F		Amount of claim		Unsecured
		cal order according to the creditor's name.	uit 2. 713	Do not deduct the	that supports this	portion
Ob and Man		Barrier de la companya de la company		value of collateral.	for supplying correct information. If more spatiditional pages, write your name and case else to report on this form. Column B	
2.1 Chase Mtg		Describe the property that secures the d		\$246,337.00	\$255,000.00	\$0.00
Creditor's Name		2055 West Chase Chicago, IL 6	0645			
		Cook County				
		3 Bed, 2 Bath, 1500 sf As of the date you file, the claim is: Chec	rk all that			
Po Box 24696		apply.	ok all triat			
Columbus, O	H 43224	☐ Contingent				
Number, Street, City,	State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mort	gage or se	cured		
Debtor 2 only		car loan)				
☐ Debtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
☐ At least one of the de	btors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim	relates to a	Other (including a right to offset)				
community debt						
	Opened					
	1/31/12					
	Last Active					
Date debt was incurred	8/01/16	Last 4 digits of account number	5087			
		_	-			
2.2 Citimortgage	Inc	Describe the property that secures the	claim:	\$304.934.00	Unknown	Unknown
Creditor's Name		Real Estate Mortgage				
		Troui Estate Mortgage				
Po Box 9438		As of the date you file, the claim is: Checapply.	ck all that			
Gaithersburg	, MD 20898	☐ Contingent				
Number, Street, City,	State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as mort	gage or se	cured		
Debtor 2 only		car loan)	5 5 . 25			
Debtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, mechan	nic'e lion\			
At least one of the de	•	☐ Statutory lien (such as tax lien, mechan	1100 11011)			
TO DESCRIPTION OF THE OF	NO BUILD AND THE	- Juguinentien nom a lawsuii				

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 19 of 47

Debtor 1	Millicent D	ayes-Gaines			Case number (if know)	
ī	First Name	Middle Na	ame Last Name			
	f this claim re inity debt	elates to a	Other (including a right to offset)			
Date debt w	vas incurred	Opened 3/09/04 Last Active 7/16/16	Last 4 digits of account number	er <u>3840</u>		
If this is the		of your form, add	olumn A on this page. Write that numb the dollar value totals from all pages.	er here:	\$551,271.00 \$551,271.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main

		Document	Page 2) of 47	
Fill in this ir	nformation to identify your	case:			
Debtor 1	Millicent Dayes-G	aines			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United State	s Bankruptcy Court for the:	NORTHERN DISTRICT OF ILI	LINOIS		
Case numbe	er				
(if known)					☐ Check if this is an
					amended filing
Official F	orm 106E/F				
		ho Have Unsecured	Claims		12/15
		e Part 1 for creditors with PRIORIT		Part 2 for creditors with NONPRIOF	
Schedule D: C eft. Attach the name and case	reditors Who Have Claims Sec e Continuation Page to this pag e number (if known).	ired Leases (Official Form 106G). Dured by Property. If more space is a le. If you have no information to rep	needed, copy 1	the Part you need, fill it out, numbe	er the entries in the boxes on the
	st All of Your PRIORITY Un				
	reditors have priority unsecure	d claims against you?			
	o to Part 2.				
☐ Yes. Part 2: Li	st All of Your NONPRIORIT	V Uneccured Claims			
	reditors have nonpriority unsec				
_		• •			
⊔ No. Yo	ou have nothing to report in this p	art. Submit this form to the court with	your other sche	dules.	
Yes.					
unsecured	d claim, list the creditor separately	aims in the alphabetical order of th / for each claim. For each claim listed st the other creditors in Part 3.If you h	l, identify what t	ype of claim it is. Do not list claims all	ready included in Part 1. If more
					Total claim
4.1 Bk (Of Amer	Last 4 digits of acc	ount number	6150	\$4,154.00
Nonp	riority Creditor's Name				
Po I	Box 982238	When was the debt	incurred?	Opened 7/28/08 Last Act 8/01/16	iive
	aso, TX 79998		illicuiteu	0/01/10	
	ber Street City State ZIp Code	As of the date you	file, the claim i	s: Check all that apply	
_	incurred the debt? Check one.	_			
	ebtor 1 only	☐ Contingent			
	ebtor 2 only	☐ Unliquidated			
	ebtor 1 and Debtor 2 only	Disputed			
	t least one of the debtors and and	_	RITY unsecured	I claim:	
☐ C debt	heck if this claim is for a comr			and a superior of the superior	al! d 4
	e claim subject to offset?	☐ Obligations arising report as priority claits		ration agreement or divorce that you	aia not
■ N	•			g plans, and other similar debts	
□ Y		Other. Specify	Credit Card		
		Utner. Specify	- Julie Guile		

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 21_of 47

Case number (if know) Debtor 1 Millicent Dayes-Gaines 4.2 \$3,384.00 Cbna Last 4 digits of account number 2889 Nonpriority Creditor's Name Opened 1/10/10 Last Active Po Box 6283 When was the debt incurred? 7/01/16 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.3 **Chase Card** 9705 Last 4 digits of account number \$8,370.00 Nonpriority Creditor's Name Opened 2/20/03 Last Active Po Box 15298 When was the debt incurred? 8/01/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.4 **Chase Card** Last 4 digits of account number 1184 \$2.519.00 Nonpriority Creditor's Name Opened 10/09/03 Last Active Po Box 15298 When was the debt incurred? 5/01/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 22 of 47

Debtor 1 Millicent Dayes-Gaines Case number (if know) 4.5 \$9,865.00 Citi Last 4 digits of account number 3165 Nonpriority Creditor's Name Opened 3/04/02 Last Active Po Box 6241 When was the debt incurred? 6/16/16 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.6 **Discover Fin Svcs Llc** Last 4 digits of account number 3334 \$1,755.00 Nonpriority Creditor's Name Opened 7/11/02 Last Active Po Box 15316 When was the debt incurred? 7/06/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.7 First Midwest Bank/Na Last 4 digits of account number 0001 \$12,231,00 Nonpriority Creditor's Name Opened 3/09/04 Last Active 300 N Hunt Club Rd When was the debt incurred? 7/07/16 Gurnee, IL 60031 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Home Equity Line Of Credit ☐ Yes

	Case 16-28323 Doc 1		ed 09/02/16 11:41:32 Des 3 of 47 Case number (if know)	sc Main
Debto	Millicent Dayes-Gaines		Case number (if know)	
4.8	Mark Lambert, MD	Last 4 digits of account number	Dayes-Gain es	\$513.00
	Nonpriority Creditor's Name Northshore Medical Group 9650 Gross Point Rd. #4900 Skokie. IL 60076	When was the debt incurred?	2016	_
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		_
4.9	Northshore Health Systems Nonpriority Creditor's Name	Last 4 digits of account number	Dayes-Gain es	\$6,500.00
	9933 Woods Dr. Skokie, IL 60077	When was the debt incurred?	2016	-
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	a plane, and other similar debte	
	■ No		g plans, and other similar debts	
	Yes	Other. Specify Medical		_
4.1	Syncb/Improvement Solu	Last 4 digits of account number	9661	\$14,076.00
	Nonpriority Creditor's Name		Opened 6/22/15 Last Active	
	950 Forrer Blvd Kettering, OH 45420	When was the debt incurred?	8/01/16	_
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	

P50 Forrer Blvd
Kettering, OH 45420

Number Street City State Zlp Code
Who incurred the debt? Check one.

Debtor 1 only
Debtor 2 only
At least one of the debtors and another
Check if this claim is for a community debt

Is the claim subject to offset?

When was the debt incurred?
When was the debt incurred?

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
Unliquidated
Unliquidated
Type of NONPRIORITY unsecured claim:
Student loans
Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify Charge Account

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ No

☐ Yes

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Case 16-28323 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Doc 1 Page 24 of 47 Case number (if know) Document

Debtor 1 Millicent Dayes-Gaines

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	<u> </u>	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	Ψ	
	ou.	Other. Add all other priority dissectived claims. Write that amount here.	ou.	>	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				7	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	63,367.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	63,367.00

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main

		12(1)	$\frac{1}{1}$	
Fill in this infor	mation to identify your	case:		
Debtor 1	Millicent Dayes-G	Saines		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	•				

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 26 of 47

	1700.111116	HI Paue 70 t	<u> 11 4 /</u>	
s information to identify	your case:			
Millicent Day	es-Gaines			
First Name	Middle Name	Last Name		
iling) First Name	Middle Name	Last Name		
ates Bankruntov Court for	the: NORTHERN DISTRICT	COE ILLINOIS		
ates bankruptey court for	uic. NorthEnt Biothio	TOT ILLINOIS		
mber			□ Che	eck if this is an
				ended filing
15 40011				
dule H: Your C	odebtors			12/15
`	,		as a codebtor.	
es				
				ritories include
o. Go to line 3.				
	r spouse, or legal equivalent liv	e with you at the time?		
ie 2 again as a codebtor (n 106D), Schedule E/F (O	only if that person is a guarar	ntor or cosigner. Make	sure you have listed the creditor on	Schedule D (Official
			Column 2: The creditor to whom Check all schedules that apply:	you owe the debt
			☐ Schedule D, line	
Name			☐ Schedule E/F, line	
			☐ Schedule G, line	
Number Street	Chata	ZID Code	_	
City	State	ZIP Code		
			Подълда В "	
Name			-	
			Schedule G, line	
			• • • • • • • • • • • • • • • • • • • •	
Number Street			_	
	Millicent Day First Name tates Bankruptcy Court for mber al Form 106H dule H: Your Court for mober re are people or entities we re filing together, both an and number the entries in the and case number (if known and number the entries in the and case number (if known and number the entries) of the search of the last 8 years, have one california, Idaho, Loui of the Column 1, list all of your cone 2 again as a codebtor in 106D), Schedule E/F (Occolumn 2. Column 1: Your codebtor Name, Number, Street, City, State Name Number Street Street Street Street	Millicent Dayes-Gaines First Name Middle Name Morthern DISTRICT Morthern D	Millicent Dayes-Gaines First Name Middle Name Last Name tates Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Mal Form 106H dule H: Your Codebtors The are people or entities who are also liable for any debts you may have. Be a re filing together, both are equally responsible for supplying correct informat and number the entries in the boxes on the left. Attach the Additional Page the leand case number (if known). Answer every question. To you have any codebtors? (If you are filing a joint case, do not list either spouse of east in the last 8 years, have you lived in a community property state or territor one, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washing. Go. Go to line 3. The ses. Did your spouse, former spouse, or legal equivalent live with you at the time? Tolumn 1, list all of your codebtors. Do not include your spouse as a codebtor to 2 again as a codebtor only if that person is a guarantor or cosigner. Make in 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 10 Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code	Millicent Dayes-Gaines First Name Middle Name Last Name

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 27 of 47

						•			
	in this information to identify your countries to a Millicent Da								
	btor 2 buse, if filing)				_				
Uni	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS						
	se number 		-				ended filing ement sho	wing postpetition	
O	fficial Form 106I						D/ YYYY	ie following date.	
_	chedule I: Your Inc	ome				MIMI / D	D/YYYY		12/15
sup spo atta Pa	as complete and accurate as pos- plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not fili ir spouse is not filing w	ng jointly, and your ith you, do not inclu	spouse ide infor	is liv mati	ing with you, on about your	nclude inf spouse. If	formation about f more space is	your needed,
1.	Fill in your employment information.		Debtor 1			Deb	or 2 or no	n-filing spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed				mployed		
	information about additional employers.		☐ Not employed			ЦN	ot employe	ed	
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Pai	Give Details About Mor	nthly Income							
spo	mate monthly income as of the duse unless you are separated.	•	,	·	•		·	·	Ū
	ou or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	on for all o	empl	oyers for that p	erson on tr	ne lines below. If	you need
						For Debtor 1		Debtor 2 or -filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.	00 \$_	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.	00 +\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	N/A	

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 28 of 47

	Copy line 4 here	Deb	tor 1	Millicent Dayes-Gaines	_	Case	number (if known)			
Copy line 4 here	Copy line 4 here									
Copy line 4 here	S. List all payroll deductions: 5a. Tax, Medicane, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund is provided to the provided retirement fund is provided retirement fund retire					For	Debtor 1	For D	ebtor 2 or	
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary Contributions for voluntary for volunt	5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for an ental property and from operating a business, profession, or farm 4c. Voluntary contributions for ental property and from operating a business, profession, or farm 4c. Voluntary contributions for ental property and from operating a business, profession, or farm 4c. Voluntary contributions for ental property and business showing gross receipts, ordinary and necessary busin				_					
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. \$0.000 \$ N/A 5c. Required repayments of retirement plans 5c. \$0.000 \$ N/A 5c. Required repayments of retirement fund loans 5c. \$0.000 \$ N/A 5c. Insurance 5c.	5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions to the supplemental plans 5c. Voluntary contributions to the expenses that you list in Schedule J. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrifion Assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrifion Assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrifion Assistance and the value (if known) of any non-cash ass		Сор	by line 4 here	4.	\$_	0.00	\$	N/A	
Sec. Voluntary contributions for retirement plans Sec. Sec. Voluntary contributions for retirement plans Sec.	55. Mandatory contributions for retirement plans 5c. \$ 0.00 \$ N/A	5.	List	all payroll deductions:						
5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ N/A 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ N/A 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ N/A 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ N/A 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ N/A 5d. \$ 0.00 \$ N/A 5d. Domestic support obligations 5f. \$ 0.00 \$ N/A 5g. Union dues 5f. \$ 0.00 \$ N/A 5g. Union dues 5f. \$ 0.00 \$ N/A 5h. Other deductions. Specify: 5h. \$ 0.00 \$ N/A 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 8. List all other income regularly receives 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8c+8c+8c+8c+8c+8c+8c+8c+8c+8c+8c+8c+	55. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5c. Insurance 5c. Voluntary Contributions of Volunt		5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5f. Domestic support obligations 5f. Domestic support obligations 5f. So. 0.00 \$ N/A 5g. Union dues 5h. Other deductions. Specify: 5h. Specify:	5d. Required repayments of retirement fund loans 5e. Insurance 7f. Domestic support obligations 7f. Sol. Sol. Oo0 Sol. N/A 7f. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7f. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7f. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7f. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7f. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7f. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8d. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$ -60.00 \$ N/A 8b. \$ 0.000 \$ N/A 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.000 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.000 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Specify: 8h. Other monthly income. Specify: 11. \$ \$ N/A 12. Add the amount in the last column of line 10 to the amount in line 11. The res		5b.	Mandatory contributions for retirement plans	5b.	\$		\$		•
Sec. Insurance Sec. \$ 0.00 \$ N/A	5e. Insurance 5f. Domestic support obligations 5f. Domestic support obligations 5g. Union dues 5g. Union dues 5g. Union dues 5g. \$ 0.000 \$ N/A 5g. Union dues 5g. \$ 0.000 \$ N/A 5g. Union dues 5g. \$ 0.000 \$ N/A 5g. Union dues 6. Add the payoll deductions. Add lines 5a+6b+5c+6d+56e+5f+5g+5h. 6. \$ 0.000 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.000 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. Social Security 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps benefits under the Supplemental Nutrian Assistance Programy or housing subsidies. Pension or retirement income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. Add all other require contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.000 20. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summar		5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
5f. Domestic support obligations 5g. Union dues 5g. Union dues 5g. Union dues 5g. S. 0.000 \$ N/A 5h. Other deductions. Specify: 5h. \$ 0.000 \$ N/A 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.000 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.000 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.000 \$ N/A 8c. Social Security 8d. Unemployment compensation 8d. \$ 0.000 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarrifed partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses list	5f. Domestic support obligations 5g. Union dues 5g. \$ 0.00 \$ N/A 5g. Union dues 5g. \$ 0.00 \$ N/A 5g. Quality feedeductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. \$ 6. \$ 0.00 \$ N/A 5g. Quality feedeductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. \$ 6. \$ 0.00 \$ N/A 5g. Quality feedeductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. \$ 6. \$ 0.00 \$ N/A 5g. Quality feedeductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. \$ 7 \$ 0.00 \$ N/A 5g. List all other income regularly received: 5g. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly neceive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 5g. Quality freelive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 5g. Quality freelive include cash assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 5g. Pension or retirement income 5g. Pension or retirement income 6g. \$ 0.00 \$ N/A 6g. Pension or retirement income 6g. \$ 0.00 \$ N/A 6g. Pension or retirement income 6g. \$ 0.00 \$ N/A 6g. Pension or retirement income 6g. \$ 0.00 \$ N/A 6g. Pension or retirement income 6g. \$ 0.00 \$ N/A 6g. Pension or retirement income 6g. \$ 0.00 \$ N/A 6g. Pension or retirement income 6g. \$ 0.00 \$ N/A 6g. Pension or retirement income 6g. \$ 0.00 \$ N/A 6g. Pension or retirement income 6g. \$ 0.00 \$ N/A 6g. Pension or retirement income 6g. \$ 0.00 \$ N/A 6g. Pension or retirement income 6g. \$ 0.00 \$ N/A 6g. Pension or retirement income 6g. \$ 0.00 \$ N/A 6g. Pension or retirement income 6g. \$ 0.00 \$ N/A		5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
5g. Union dues 5g. Union dues 5g. \$ 0.00 \$ N/A 5h. Other deductions. Specify: 5h. Other deductions. Specify: 5h. Other deductions. Specify: 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 1,929.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. Calculate monthly income. Add lines 9. Non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other	5g. Union dues 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$0.00 \$N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 \$N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 \$N/A 8c. San Net income regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. \$0.00 \$N/A 8e. \$0.00 \$N/A 8f. Other government assistance that you regularly receive include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$504.77 \$N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$2,373.77 \$N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$0.00						-			
5h. Other deductions. Specify: 5h.+ \$ 0.00 + \$ N/A 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 1,929.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h.+ \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add lines 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expense	5h. Other deductions. Specify: 5h. 4 \$ 0.00 + \$ N/A Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. \$ 0.00 \$ N/A 8e. Social Security 8f. \$ 0.00 \$ N/A 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrifion Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 11. *\$ N/A 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies							· —		
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5l+5g+5h. 6. \$ 0.00 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. + \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:	6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 8. List all other income regularly received: 8a. Not income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8e. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance root hat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add lines 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.000 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it proper to the summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it to the summary of Schedules and Statistical Summar		-		-	· -		· —		
7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.	7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (henefits under the Supplemental Nutrition Assistance Program) or housing subsidies. \$g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 504,77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add lines 7 + line 9. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies of the summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies to you expect an increase or decrease within th				_	· -				:
8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 0.100 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Add line 8 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:	8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8d. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	N/A	
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 1,929.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. Unemployment compensation 8d. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/A	
profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. Social Security 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8d. Unemployment assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 9. Add all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	8.								
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 9. Add all other income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. \$ 2,373.77 \$ N/A 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 1,929.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add line 8 sa+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies		ва.							
monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8d. Unemployment assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:	monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies									
8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include allinomy, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. ** 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies									
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include allmony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 1,929.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 2,373.77 \$ N/A 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies		01	·						
regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 1,929.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h.+ \$ 0.00 + \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 1,929.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 9. Add all other income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 2,373.77					\$_	0.00	\$	N/A	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 1,929.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 2,373.77 \$ N/A 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 1,929.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 2,373.77		8C.							
settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. + \$ 0.000 + \$ N/A Nutrition Assistance Program) or housing subsidies. Specify: 8h. + \$ 0.000 + \$ N/A Nutrition Assistance Program) or housing subsidies. Pension or retirement income 8g. \$ 504.77 \$ N/A Nutrition Assistance Program) or housing subsidies. Pension or retirement income 8g. \$ 504.77 \$ N/A Nutrition Assistance Program) or housing subsidies. Pension or retirement income 8g. \$ 504.77 \$ N/A Nutrition Assistance Program) or housing subsidies. Pension or retirement income 8g. \$ 504.77 \$ N/A Nutrition Assistance and the subsidies of the supplemental Nutrition Assistance that you receive that you receive the supplemental Nutrition Assistance Program) or housing subsidies. Pension or retirement income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A Nutrition Assistance and the supplemental Nutrition Assistance that you receive the supplemental Nutrition Assistance and Statistical Supplemental Nutrition Assistance and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 2,373.77 Combined Monthly income.									
8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h.	8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 2,373.77 Combined monthly income				8c.	\$_	0.00	\$		
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. \$ 0	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. Other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add lines 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form?		8d.			. —				
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. + \$ 0.00	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 504.77 \$ N/A 8h. Other monthly income. Specify: 8h. Other monthly income. Specify: 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 8			•	8e.	\$_	1,929.00	\$	N/A	
that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h.+ \$ 0.00 + \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form?		8f.							
Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. \$ 0.00 + \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 + \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 14. \$ 2,373.77 Combined monthly income				;					
8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. Other monthly income. Specify: 8h. Sp	8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. 4 \$ 0.00 + \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77									
8h. Other monthly income. Specify: 8h. + \$ 0.00 + \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	8h. Other monthly income. Specify: 8h. + \$ 0.00 + \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,373.77			Specify:	8f.		0.00	\$	N/A	
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$\frac{2,373.77}{\text{N/A}}\$ \$\frac{N/A}{\text{N/A}}\$ = \$\frac{2,373.77}{\text{N/A}}\$ = \$\fra	9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$\frac{2,373.77}{\\$} \\$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$\frac{2,373.77}{\\$} \] Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form?		-		-	· —		· —		
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income		8h.	Other monthly income. Specify:	8h.+	\$_	0.00	+ \$	N/A	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income	9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2.373.77	\$	N/A	
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form?						2,010111	Ľ		
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form?	10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$		2.373.77 + \$		N/A = \$	2.373.77
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i> , if it applies 13. Do you expect an increase or decrease within the year after you file this form?		Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			, -			,
other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form?	11.	Stat	e all other regular contributions to the expenses that you list in Schedule	. J.					
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00	Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J.</i> Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i> , if it applies 12. Combined monthly income				depen	dents	, your roommates	, and		
Specify: 11. +\$0.00	Specify:				availah	lo to r	av avnancas liet	nd in Sa	hodulo I	
	Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$\(\) \(\) \(\) \(\) \(\) \(\) Combined monthly income \(\) \			·	avallab	ie io į	day expenses list	eu III 30		0.00
	Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$\(\) \(\) \(\) \(\) \(\) \(\) Combined monthly income \(\) \		·	•				_		
	applies 12. \$\frac{2,373.77}{Combined}\$ 13. Do you expect an increase or decrease within the year after you file this form?	12.								
· · · · · · · · · · · · · · · · · · ·	Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form?			,	ın Lıabı	lities a	and Related <i>Data</i>	, if it	12. \$	2,373.77
	13. Do you expect an increase or decrease within the year after you file this form?		аррі							
	13. Do you expect an increase or decrease within the year after you file this form?									
		13.	Dον	you expect an increase or decrease within the year after you file this form	?				monthly	, illoulle
	■ NO.			No.						
■ No.				Yes. Explain:						
				1 00. Explain.						

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 29 of 47

Fill in	this information to identify your case:				
Debto	Millicent Dayes-Gaines		Check	if this is:	
Debto	or 2		_	an amended filing	ving postpetition chapter
	use, if filing)				the following date:
United	d States Bankruptcy Court for the: NORTHERN DISTRICT OF ILL	INOIS	<u></u>	MM / DD / YYYY	
1	number				
(If kno	own)				
Off	icial Form 106J				
	hedule J: Your Expenses				12/1
Be as	s complete and accurate as possible. If two married people mation. If more space is needed, attach another sheet to thiber (if known). Answer every question.	are filing together, bo is form. On the top of	th are equal any addition	lly responsible fo nal pages, write y	or supplying correct your name and case
Part 1					
	Is this a joint case?				
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?				
•	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expens</i>	es for Separate Housel	hold of Debto	or 2.	
2. I	Do you have dependents? ■ No				
	Do not list Debtor 1 and Yes. Fill out this information for	Dependent's relation	onship to	Dependent's	Does dependent
	Debtor 2.	Debtor 1 or Debtor		age	live with you?
I	Do not state the				□ No
(dependents names.				□ Yes
					□ No
		-			☐ Yes ☐ No
					☐ Yes
					□ No
					☐ Yes
	Do your expenses include ■ No				
	expenses of people other than				
3	yourself and your dependents?				
Estin	Estimate Your Ongoing Monthly Expenses nate your expenses as of your bankruptcy filing date unlessenses as of a date after the bankruptcy is filed. If this is a su				
appli	icable date.				
Include the value	de expenses paid for with non-cash government assistance ralue of such assistance and have included it on <i>Schedule I</i>	e if you know : Your Income		.,	
(Offic	cial Form 106l.)			Your expe	enses
	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	. Include first mortgage	4. \$		1,594.00
ı	If not included in line 4:				
4	4a. Real estate taxes		4a. \$		0.00
4	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		10.00
	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as I	homo aquitu lasas	4d. \$ 5. \$		0.00
D. /	ADDITIONAL INORTORIOR DEVINENTS FOR VOLLE FESIGENCE, SUCh as I	DOING BOILITY IOANS	2 %		(1 (1(1

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 30 of 47

Deptor	Willicen	t Dayes-Gaines	Case num	ber (if known)	
6. U 1	tilities:				
6. 0 .		, heat, natural gas	6a.	\$	140.00
6t		wer, garbage collection	6b.	·	20.00
60	-	e, cell phone, Internet, satellite, and cable services	6c.		75.00
60	•		6d.	·	0.00
		ekeeping supplies	ou. 7.	\$	
				•	300.00
_		children's education costs	8.	\$	0.00
		lry, and dry cleaning	9.		30.00
		products and services	10.		25.00
		ental expenses	11.	\$	20.00
		Include gas, maintenance, bus or train fare.	12.	c	65.00
	o not include o				
		clubs, recreation, newspapers, magazines, and books	13.	· -	5.00
		tributions and religious donations	14.	\$	0.00
-	surance.				
		nsurance deducted from your pay or included in lines 4 or 20.	45-	ф	0.00
	5a. Life insura		15a.		0.00
	b. Health ins		15b.	·	0.00
15	5c. Vehicle in	surance	15c.	·	62.00
		urance. Specify:	15d.	\$	0.00
		nclude taxes deducted from your pay or included in lines 4 or 20.			<u> </u>
	pecify:		16.	\$	0.00
		ease payments:			
		ents for Vehicle 1	17a.	·	0.00
17	b. Car paym	ents for Vehicle 2	17b.	\$	0.00
17	c. Other. Sp	ecify:	17c.	\$	0.00
17	d. Other. Sp	ecify:	17d.	\$	0.00
3. Y o	our payments	of alimony, maintenance, and support that you did not report	as		0.00
		your pay on line 5, Schedule I, Your Income (Official Form 106)	I). 18.	· .	0.00
9. O 1	ther payment	s you make to support others who do not live with you.		\$	0.00
	pecify:		19.		
		perty expenses not included in lines 4 or 5 of this form or on Sc			
20	oa. Mortgage	s on other property	20a.		0.00
20	b. Real esta	te taxes	20b.	\$	0.00
20	c. Property,	homeowner's, or renter's insurance	20c.	\$	0.00
20	d. Maintena	nce, repair, and upkeep expenses	20d.	\$	0.00
		ner's association or condominium dues	20e.	\$	0.00
1. O	ther: Specify:		21.	· .	0.00
				· Ψ	0.00
	•	monthly expenses			
22	2a. Add lines 4	through 21.		\$	2,346.00
22	2b. Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	·
22	2c. Add line 22	a and 22b. The result is your monthly expenses.		\$	2,346.00
				· —	<u> </u>
	•	monthly net income.			
		12 (your combined monthly income) from Schedule I.	23a.		2,373.77
23	Bb. Copy you	r monthly expenses from line 22c above.	23b.	-\$	2,346.00
					<u> </u>
23		our monthly expenses from your monthly income.	20	•	27 77
	The resul	t is your monthly net income.	23c.	\$	27.77
			,		
		an increase or decrease in your expenses within the year after			una ar daaraasa bassuss s
		ou expect to finish paying for your car loan within the year or do you expect yeterms of your mortgage?	our mortgage	payment to increa	ise of decrease decause o
	_	tomic of your mongage:			
	No.				
	Yes	Explain here:			

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 31 of 47

Fill in this info	rmation to identify your	case:			
Debtor 1	Millicent Dayes-G	aines			
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle News	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
C					
Case number					☐ Check if this is an
, ,					amended filing
Official For	<u>m 106Dec</u>				
Declara	tion About a	n Individua	I Debtor's S	chedules	12/15
If two married p	people are filing together	r, both are equally resp	onsible for supplying c	orrect information.	
Vou must file th	sie form whonover you fi	la bankruntay sabaduk	s or amondod schodule	ne. Makina a faleo etato	ement, concealing property, or
					0, or imprisonment for up to 20
	18 U.S.C. §§ 152, 1341, 1			• • •	
Sig	gn Below				
D: I				. h l 0	
Dia you p	ay or agree to pay some	one who is NOT an atto	orney to neip you fill ou	t bankruptcy forms?	
■ No					
-				A., 1 D .	
☐ Yes.	Name of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
				Doolaration,	, and Signature (Similar 1 Sim 1 13)
	alty of perjury, I declare are true and correct.	that I have read the sui	nmary and schedules f	iled with this declaratio	on and
that they a	ire true and correct.				
X /s/ Mil	Ilicent Dayes-Gaines		X		
	ent Dayes-Gaines		Signature	of Debtor 2	
Signati	ure of Debtor 1				
Date	September 2, 2016		Date		
Date .	Depterriber 2, 2010				

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 32 of 47

Fill in this info	rmation to identify you	case:			
Debtor 1	Millicent Dayes-	Gaines			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
Official F	orm 107				
		Affairs for Indivi	duals Filing for B	ankruptcy	4/1
information. If		attach a separate sheet to	are filing together, both are this form. On the top of any		
Part 1: Give	Details About Your Ma	rital Status and Where Yo	u Lived Before		
1. What is yo	our current marital statu	s?			
☐ Marrie	ad				
_	arried				
2. During the	e last 3 years, have you	lived anywhere other than	where you live now?		
■ No					
■ No □ Yes. I	ist all of the places you l	ved in the last 3 years. Do r	not include where you live now	<i>ı</i> .	
Debtor 1	Prior Address:	Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
			gal equivalent in a commun		
states and territ	ories include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	evada, New Mexico, Puerto Ri	ico, Texas, Washington and	Wisconsin.)
■ No					
☐ Yes. N	Make sure you fill out <i>Sch</i>	nedule H: Your Codebtors (C	Official Form 106H).		
Part 2 Expl	ain the Sources of You	r Income			
4. Did you ha	ave any income from en	nployment or from operati	ng a business during this ye	ear or the two previous ca	lendar years?
			all businesses, including part- re together, list it only once ur		·
■ No □ Yes. F	Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
			3.0.00.00)		a 5 5 5 6 6 6 6

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Page 33 of 47
Case number (if known) Document

Debtor 1 Millicent Dayes-Gaines

5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.										
	List e	ach s	source and t	he gross inco	me from each sourc	e separately. Do	not include income	that you listed in lir	ne 4.		
		No									
	_		Fill in the de	etails.							
					5.17			5.17			
					Debtor 1 Sources of incom Describe below.	each (befo	ss income from a source ore deductions and usions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)	
		•	1 of currei iled for bar	nt year until nkruptcy:	SSI Benefits		\$15,400.00				
	for last calendar year: SSI Benefits \$23,100.00 January 1 to December 31, 2015)										
	For the calendar year before that: SSI Benefits \$23,100.00 January 1 to December 31, 2014)										
Pai	rt 3:	List	Certain Pa	yments You	Made Before You F	Filed for Bankru	ptcy				
6.		either No.	Neither De	ebtor 1 nor D	s debts primarily c bebtor 2 has primar personal, family, or	ily consumer de	bts. Consumer deb	ts are defined in 11	U.S.C. § 101	(8) as "incurred by an	
			During the	90 days befo	re you filed for bank	d for bankruptcy, did you pay any creditor a total of \$6,425* or more?					
			□ No.	Go to line 7							
			Yes	paid that cre not include	each creditor to whore ditor. Do not include payments to an attor on 4/01/19 and eve	e payments for de rney for this bank	omestic support obli ruptcy case.	gations, such as ch	nild support a	nd alimony. Also, do	
	_		Subject	io aujustinen	1 011 4/0 1/ 19 and eve	ry 5 years after ti	lat for cases filed of	i or arter the date t	n aujustinent.		
	•	Yes.			r both have primaring you filed for bank	-		al of \$600 or more?	?		
			□ No.	Go to line 7							
			■ Yes	include pay	each creditor to whor ments for domestic s this bankruptcy case	support obligation				creditor. Do not noclude payments to an	
	Cred	ditor'	s Name and	d Address	Dates o	of payment	Total amount paid	Amount you still owe	Was this p	ayment for	
	Po I	Вох	gage Inc 9438 sburg, MD	20898		ecent 3 s prior to	\$10,254.00	\$304,934.00	■ Mortgag □ Car		

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Citimortgage Inc Po Box 9438 Gaithersburg, MD 20898	Most recent 3 months prior to filing.	\$10,254.00	\$304,934.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
Chase Mtg Po Box 24696 Columbus, OH 43224	Most recent 3 months prior to filing.	\$4,782.00	\$246,337.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main

Page 34 of 47
Case number (if known) Document Debtor 1 Millicent Dayes-Gaines

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.									
	No☐ Yes. List all payments to an insider.									
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you		this payment				
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cost		•	any property or	n account of a d	lebt that benefited an				
	No☐ Yes. List all payments to an insider									
	Insider's Name and Address	Dates of payment	Total amount	Amount you	ı Reason for	this payment				
	moladi di Namo ana Maarees	Dates of payment	paid	still owe		ditor's name				
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures								
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.									
	Case title Case number	Nature of the case	Court or agency		Status of the	ne case				
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.									
	Creditor Name and Address	Describe the Property Date				Value of the property				
		Explain what happened				property				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becan a No Yes. Fill in the details.	ause you owed a debt?								
	Creditor Name and Address	Describe the action the	creditor took		te action was	Amount				
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No ☐ Yes		rty in the possess	ion of an assig	nee for the ben	efit of creditors, a				
Par	t 5: List Certain Gifts and Contributions									
13.	Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	tcy, did you give any gifts	s with a total value	of more than \$	6600 per person	?				
	Gifts with a total value of more than \$600 per person	Describe the gifts			ites you gave e gifts	Value				
	Person to Whom You Gave the Gift and Address:									

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Page 35 of 47
Case number (if known) Document Debtor 1 Millicent Dayes-Gaines 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made

Person Who Made the Payment, if Not You \$2,300.00 07/2016 Fonfrias Law Group, LLC **Attorney Fees** 70 West Madison

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.

No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of **Address** transferred or transfer was payment made

Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Suite 1400 Chicago, IL 60602

rfonfrias2025@gmail.com

Yes. Fill in the details.

Person Who Received Transfer Description and value of Describe any property or Date transfer was payments received or debts Address property transferred made paid in exchange Person's relationship to you

Desc Main Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Page 36 of 47
Case number (if known) Document

Debtor 1 Millicent Dayes-Gaines

19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot No		ny property to a	a self-settle	ed trust or similar device	of which you are a	
	☐ Yes. Fill in the details.						
	Name of trust	Description and	value of the pro	perty trans	sferred	Date Transfer wa made	ıs
Pa	rt 8: List of Certain Financial Accounts, Inst	truments, Safe Depos	it Boxes, and S	torage Uni	ts		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association No	other financial accou	ınts; certificate	s of depos		,	
		Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balan before closing transf	or
21.	Do you now have, or did you have within 1 yo cash, or other valuables?	ear before you filed fo	r bankruptcy, a	ıny safe de	posit box or other depos	sitory for securities	,
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit of	r place other than you	r home within	1 year befo	re you filed for bankrupt	ccy?	
	☐ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?	
Pa	rt 9: Identify Property You Hold or Control f	or Someone Else					
23.	Do you hold or control any property that son for someone.	neone else owns? Inc	lude any prope	rty you bor	rowed from, are storing	for, or hold in trust	
	■ No						
	Yes. Fill in the details.		_	_			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Valu	ıe
	rt 10: Give Details About Environmental Info						
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surfac	e water, groun				or
	Site means any location, facility, or property to own, operate, or utilize it, including dispose	as defined under any		law, wheth	ner you now own, operat	e, or utilize it or use	∌d
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,						

hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Page 37 of 47
Case number (if known) Document

Debtor 1 **Millicent Dayes-Gaines**

24.	_	overnmental unit notified you that	you may be liable or potentially liable	under or in violation of an environme	ntal law?			
	■ No □ Yes.	Fill in the details.						
	Name of		Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you	notified any governmental unit of	any release of hazardous material?					
	■ No □ Yes.	Fill in the details.						
	Name of s	Site Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you	been a party in any judicial or adn	ninistrative proceeding under any envi	ronmental law? Include settlements a	nd orders.			
	■ No □ Yes.	Fill in the details.						
	Case Title Case Nur		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t 11: Give	Details About Your Business or	Connections to Any Business					
27.	Within 4 y	ears before you filed for bankrupt	cy, did you own a business or have an	y of the following connections to any	business?			
	□ A :	sole proprietor or self-employed i	n a trade, profession, or other activity,	either full-time or part-time				
	□ A :	member of a limited liability comp	any (LLC) or limited liability partnershi	p (LLP)				
	□ A	partner in a partnership						
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	No. None of the above applies. Go to Part 12.							
	☐ Yes.	Check all that apply above and fill	in the details below for each business					
	Business	Name	Describe the nature of the business	Employer Identification number				
	Address (Number, Str	eet, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security n	lumber or IIIN.			
28.		ears before you filed for bankrupt s, creditors, or other parties.	cy, did you give a financial statement t	o anyone about your business? Inclu	de all financial			
	■ No □ Yes.	- -ill in the details below.						
	Name Address (Number, Str	eet, City, State and ZIP Code)	Date Issued					

Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Case 16-28323 Page 38 of 47
Case number (if known) Document

Debtor 1 Millicent Dayes-Gaines

Part 1	2: Sign Below				
		 	 _		

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

	ith a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. B U.S.C. §§ 152, 1341, 1519, and 3571.							
/s/ Mi	Illicent Dayes-Gain	ies						
	ent Dayes-Gaines ture of Debtor 1		Signature of Debtor 2					
Date	September 2, 20	16	Date					
_ •	u attach additional p	ages to Your Statemen	t of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?					
■ No								
☐ Yes								
Did yo	u pay or agree to pay	y someone who is not a	an attorney to help you fill out bankruptcy forms?					
■ No								
☐ Yes	Name of Person	Attach the Bankrupt	tcv Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 39 of 47

Fill in this info	rmation to identify your	case:		
Debtor 1	Millicent Dayes-G	aines		
Dahtano	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing
Official Fo	orm 108			
Stateme	nt of Intentio	n for Indiv	riduals Filing Under Chapto	er 7
	dividual filing under cha	-	I out this form if:	
	ve claims secured by yo		at avairad	
You must file th	ever is earlier, unless th	ithin 30 days after	ot expired. you file your bankruptcy petition or by the date s e time for cause. You must also send copies to th	
		r in a joint case, bo	th are equally responsible for supplying correct in	nformation. Both debtors must
	and date the form.	in a joint case, so	in are equally responsible for supplying correct in	morniation. Both desicro must
	and accurate as possib		s needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Y	Your Creditors Who Have	e Secured Claims		
1. For any credi	itors that you listed in Pa		: Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
information be Identify the c	elow. reditor and the property t	hat is collateral	What do you intend to do with the property tha	
			secures a debt?	as exempt on Schedule C?
One ditente	Ohara Mara		П	D
Creditor's (Chase Mtg		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description o	f 2055 West Chase (Chicago II	Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property	60645 Cook Coun	ty	Retain the property and [explain]:	
securing deb	t: 3 Bed, 2 Bath, 150	0 sf	Debtor(s) will continue regular monthly payments.	_
	Citimortgage Inc		☐ Surrender the property.	■ No
name:			☐ Retain the property and redeem it. ☐ Retain the property and enter into a	П Усс
Description o	f Real Estate Mortga	age	Reaffirmation Agreement.	☐ Yes
property			Retain the property and [explain]:	
securing debi	t:		Debtor(s) will continue regular monthly payments.	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Official Form 108

Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 40 of 47

Debto	or 1 Millic	ent Dayes-Gaines	Case number (if known	n)
Desc	ribe your ur	nexpired personal property leases		Will the lease be assumed?
Desci	or's name: ription of leas	sed		□ No
Prope	епу:			☐ Yes
	or's name: ription of leas	sed		□ No
Prope	erty:			☐ Yes
	or's name: ription of leas	sed		□ No
Prope	erty:			☐ Yes
	or's name: ription of leas	sed		□ No
Prope	erty:			☐ Yes
	or's name: ription of leas	sed		□ No
Prope				☐ Yes
	or's name: ription of leas	sed		□ No
Prope				☐ Yes
	or's name: ription of leas	sed		□ No
Prope				☐ Yes
Part 3	Sign Be	alow		
Tarte	olgii be			
		perjury, I declare that I have indicated ubject to an unexpired lease.	d my intention about any property of my estate that so	ecures a debt and any personal
X /	/s/ Millicen	t Dayes-Gaines	X	
Ī		ayes-Gaines	Signature of Debtor 2	
[Date Se	eptember 2, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-28323 Doc 1 Filed 09/02/16 Entered 09/02/16 11:41:32 Desc Main Document Page 45 of 47

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Millicent Dayes-Gaines		Case No).		
	<u> </u>	Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)		
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	y, or agreed to be pa	id to me, for services rendered or to		
	For legal services, I have agreed to accept		\$	2,300.00		
	Prior to the filing of this statement I have received			2,300.00		
	Balance Due		\$	0.00		
2. ′	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3. ′	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	n unless they are me	mbers and associates of my law firm.		
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the nar					
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
1	a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credited. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on how	ement of affairs and plan which ors and confirmation hearing, a educe to market value; ex ons as needed; preparatio	th may be required; and any adjourned h	earings thereof; g; preparation and filing of		
6.]	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			nces, relief from stay actions or		
		CERTIFICATION				
	I certify that the foregoing is a complete statement of any ankruptcy proceeding.	y agreement or arrangement for	or payment to me fo	r representation of the debtor(s) in		
s	eptember 2, 2016	/s/ Richard Fonf	rias			
D	ate	Richard Fonfrias Signature of Attorn Fonfrias Law Gr 70 West Madiso	ey oup, LLC			
		Suite 1400	20			
		Chicago, IL 6060 3129690730 Fa				
		rfonfrias2025@g				
		Name of law firm				

United States Bankruptcy Court Northern District of Illinois

In re	Millicent Dayes-Gaines		Case No.	
		Debtor(s)	Chapter 7	
	VERI	FICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors:	11
	The above-named Debtor(s) her (our) knowledge.	reby verifies that the list of credito	rs is true and correct to	the best of my
Date:	September 2, 2016	/s/ Millicent Dayes-Gaines Millicent Dayes-Gaines Signature of Debtor		

Bk Of Amer Po Box 982238 El Paso, TX 79998

Cbna Po Box 6283 Sioux Falls, SD 57117

Chase Card Po Box 15298 Wilmington, DE 19850

Chase Mtg Po Box 24696 Columbus, OH 43224

Citi Po Box 6241 Sioux Falls, SD 57117

Citimortgage Inc Po Box 9438 Gaithersburg, MD 20898

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

First Midwest Bank/Na 300 N Hunt Club Rd Gurnee, IL 60031

Mark Lambert, MD Northshore Medical Group 9650 Gross Point Rd. #4900 Skokie, IL 60076

Northshore Health Systems 9933 Woods Dr. Skokie, IL 60077

Syncb/Improvement Solu 950 Forrer Blvd Kettering, OH 45420